

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 109936 FILING DATE 1-4-80
APPLICANT(S) Lindahl et al

| | CLAIMS | | | | | |
|-----------------|----------|------|------------------------|------|------------------------|------|
| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | |
| | IND. | DEP. | IND. | DEP. | IND. | DEP. |
| 1 | 1 | | 1 | | | |
| 2 | 1 | | 1 | | | |
| 3 | 1 | | 1 | | | |
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| TOTAL IND. | 4 | | 4 | | | |
| TOTAL DEP. | 1 | ↔ | 5 | ↔ | | ↔ |
| TOTAL CLAIMS | 5 | | 9 | | | |